

DECLARATION AND POWER OF ATTORNEY	Attorney's Docket No. 6204-00135
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6204-00135

My residence, post office address and citizenship are as stated below next to my name.

(check one)      ☒ is attached hereto  
                          ☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_  
                          and was amended on \_\_\_\_\_

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

Application Serial No.	Filing Date	Status (patented, pending, abandoned)

Application Serial No. _____	Filing Date _____	Additional provisional application numbers are listed on a supplemental page attached hereto.
_____	_____	

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## DECLARATION AND POWER OF ATTORNEY

Attorney's Docket No.

6204-00135

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application and any patent issued thereon.

## SOLE OR FIRST INVENTOR:

Full Name: Phillip Brent GreeneSignature: Date: 2-1-02Residence: Jackson, MO 63755Citizenship: USAPost Office Address: 425 County Rd. 441, Jackson, MO 63755

## SECOND JOINT INVENTOR, IF ANY:

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## THIRD JOINT INVENTOR, IF ANY:

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## FOURTH JOINT INVENTOR, IF ANY:

Full Name: César J. MaurasSignature: Date: 1-30-02Residence: St. Louis, MO 63108Citizenship: USAPost Office Address: 275 Union Blvd., Apt. 1015, St. Louis, MO 63108